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FILED  
U.S. BANKRUPTCY COURT  
DISTRICT OF HAWAII  
2015 FEB 24 A 11:39  
MICHAEL B. DOWLING  
CLERK OF COURT

UNITED STATES BANKRUPTCY COURT  
DISTRICT OF HAWAII  
1132 Bishop Street, Suite 250  
Honolulu, Hawaii 96813

JUANITO MALICDEM BATO, II  
ALDA JOY COLLO BATO

Chapter: 13 Case No.: 14-01667

Related Docket No.: 3

### COVER SHEET FOR AMENDMENTS

Check all of the following that are being amended.

Schedules: ☐ A ☐ B ☐ C ☐ G ☐ H ☐ I ☐ J

Schedules: ☐ D ☐ E ☒ F (\$30.00 fee for 1 or more)

☐ Statement of Financial Affairs

☐ Statement of Intention

☐ Statement of Monthly Income (Ch 7 - with Means Test / Ch 13 - with Disposable Income Calculation)

☒ List of Creditors / Mailing Matrix

☐ \$30.00 fee (must be paid unless (i) only updating an address, or (ii) only adding a creditor's attorney)

☐ List of Equity Security Holders

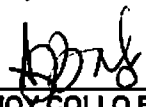
☐ List of 20 Largest Unsecured Creditors

### DECLARATION BY DEBTOR(S)

I declare under penalty of perjury that the attached amendments are correct to the best of my knowledge, information, and belief. [If filing electronically through ECF, a Declaration re: Electronic Filing with original signatures must be submitted on paper not later than 7 days after filing the amendments.]

  
JUANITO MALICDEM BATO, II  
Signature of Debtor

Dated: 02.20.15

  
ALDA JOY COLLO BATO  
Signature of Joint Debtor

Dated: 2.20.15

### CERTIFICATE OF SERVICE

The undersigned certifies:

☒ Notice of the amendments has been served on all creditors and parties in interest on the attached service list. (If exemptions or exemption amounts have been amended, a copy of Schedule C has been served on all creditors and parties in interest.)

☐ A copy of the Notice of Bankruptcy Case, Meeting of Creditors, & Deadlines has been served on the additional creditors and parties in interest identified on the attached service list.

Dated: 2/18/15

  
Joyce J. Uehara

Attach amended schedules or statements to cover sheet. Attach a service list with names and addresses where notice was sent.

In re **JUANITO MALICDEM BATO, II,  
ALDA JOY COLLO BATO**Case No. **14-01667**

Debtors

**AMENDED  
SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Code debtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Code debtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	Husband, Wife, Joint, or Community				CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
	C O D E D E B T O R	H	W	J C				
Account No. <b>2975</b>  <b>ARMG of Hawaii</b> <b>1401 S Beretania Street</b> <b>Suite 250</b> <b>Honolulu, HI 96814-1876</b>			<b>W</b>					<b>134.98</b>
Account No. <b>7905</b>  <b>Calvin S. Oishi, M.D., Inc.</b> <b>P.O. Box 30570</b> <b>Honolulu, HI 96820-0570</b>			<b>W</b>					<b>15.17</b>
Account No. <b>0944</b>  <b>Capital One</b> <b>c/o Marvin S.C. Dang, Esq</b> <b>P.O. Box 4109</b> <b>Honolulu, HI 96812-4109</b>			<b>H</b>					<b>6,393.38</b>
Account No. <b>unknown</b>  <b>Capital One</b> <b>P. O. Box 30281</b> <b>Salt Lake City, UT 84130-0281</b>			<b>H</b>					<b>6,538.00</b>
Subtotal (Total of this page)								<b>13,081.53</b>

5 continuation sheets attached

In re **JUANITO MALICDEM BATO, II,  
ALDA JOY COLLO BATO**Case No. **14-01667**

Debtors  
**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. unknown  Chemi Toi c/o National Recovery Agency 2491 Paxton Street Harrisburg, PA 17111-1036		H	claim incurred in 2009 for rental of portable toilet			181.00
Account No. 9789  Citifinancial, Inc. 91-1001 Kaimalie Street Suite 103 Ewa Beach, HI 96706		J	claim incurred in 2010 for refinance of personal loan			14,671.80
Account No. 2357  Citifinancial, Inc. c/o Marvin S.C. Dang, Esq. P.O. Box 4109 Honolulu, HI 96812-4109		H				10,357.51
Account No. 7287  GECRB/Chevron Bankruptcy Department P.O. Box 103106 Roswell, GA 30076-3106		H	claim incurred in 2012 for credit card purchases			2,331.36
Account No. unknown  GECRB/GE Capital c/o P.O. Box 965036 Orlando, FL 32896-5036		H	claim incurred in 2012 for credit card purchases			2,368.00
Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>29,909.67</b>

In re **JUANITO MALICDEM BATO, II,  
ALDA JOY COLLO BATO**Case No. **14-01667**

Debtors  
**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C					
Account No. 8669	W		claim incurred in 2011 for credit card purchases				584.62
GECRB/Walmart c/o Portfolio Recovery Assocs., LLC 120 Corporate Boulevard Norfolk, VA 23502							
Account No. 8446	W		claim incurred in 06/2014 for medical services for joint debtor				18.22
Greigh I. Hirata, M.D., Inc. P.O. Box 1300 Mail Code 61247 Honolulu, HI 96807							
Account No. unknown	W		claim incurred in 2012 for veterinary services				137.32
Hawaii Pet Imaging Centers, LLC c/o Credit associates of Maui P.O. Box 1074 Wailuku, HI 96793							
Account No. unknown	H		claim incurred in 2008 for personal loan				7,250.00
Hawaii USA FCU 1226 College Walk Honolulu, HI 96817							
Account No. unknown	H		claim incurred in 2012 for credit card purchases				5,884.00
HSBC c/o CACH, LLC 4340 S. Monaco Street, 2nd Floor Denver, CO 80237-3485							
Subtotal (Total of this page)							13,874.16

Sheet no. 2 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims

In re **JUANITO MALICDEM BATO, II,  
ALDA JOY COLLO BATO**Case No. **14-01667**

Debtors  
**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		H W J C				
Account No. 3521  Macy's c/o Northald Group, Inc. P.O. Box 390846 Minneapolis, MN 55439		W	claim incurred in 2013 for credit card purchases			2,061.30
Account No. 438  Nordstrom FSB P.O. Box 13589 Scottsdale, AZ 85267-3589		H	claim incurred in 2012 for credit card purchases			47.21
Account No. 7261  OneMain Financial NTBS-2320 6801 Colwell Boulevard Irving, TX 75039-3192		H	claim incurred in 2012 for personal loan			14,089.76
Account No. unknown  OneMain Financial NTBS-2320 3801 Colwell Boulevard Irving, TX 75039-3198		J	claim incurred in 2011 for personal loan			10,357.00
Account No. 2948  Pacific Radiology Group, Inc. 321 N Kuakini St Suite 405 Honolulu, HI 96817		H	claim incurred in 10/2012 for medical services for debtor			2.38
Sheet no. <u>3</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						Subtotal (Total of this page) <b>26,557.65</b>

In re **JUANITO MALICDEM BATO, II,  
ALDA JOY COLLO BATO**

Case No. **14-01667**

Debtors  
**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E D E B T O R	Husband, Wife, Joint, or Community	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
		DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.				
Account No. <b>9890</b>  <b>Pan Pacific Pathologists, LLC</b> <b>P.O. Box 1880</b> <b>Hilo, HI 96721-1880</b>	<b>W</b>	<b>claim incurred in 09/2013 for medical services for joint debtor</b>				<b>11.31</b>
Account No. <b>unknown</b>  <b>Penn Foster</b> <b>14300 N Northsight Boulevard</b> <b>Suite 120</b> <b>Scottsdale, AZ 85260</b>	<b>W</b>	<b>claim incurred in 2009 for student loan</b>				<b>622.00</b>
Account No. <b>833A</b>  <b>Physician Fin. Recovery Svc., LLC</b> <b>1132 Bishop Street</b> <b>Suite 303</b> <b>Honolulu, HI 96813</b>	<b>W</b>	<b>claim incurred in 11/2014 for medical services for joint debtor</b>				<b>55.34</b>
Account No. <b>8551</b>  <b>Radiology Associates, Inc.</b> <b>P.O. Box 30990</b> <b>Honolulu, HI 96820-0990</b>	<b>W</b>	<b>claim incurred in 08/2014 for medical services for joint debtor</b>				<b>2.84</b>
Account No. <b>2274</b>  <b>Sorbella Guillermo, M.D., Inc.</b> <b>94-300 Farrington Highway</b> <b>Suite F8</b> <b>Waipahu, HI 96797-2648</b>	<b>H</b>	<b>claim incurred in 2012-2014 for medical services for dependents</b>				<b>132.58</b>
Sheet no. <b>4</b> of <b>5</b> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims						<b>Subtotal (Total of this page)</b> <b>824.07</b>

In re **JUANITO MALICDEM BATO, II,  
ALDA JOY COLLO BATO**Case No. **14-01667**

Debtors  
**AMENDED**  
**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**  
(Continuation Sheet)

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	C O D E B T O R	H W J C	Husband, Wife, Joint, or Community  DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	C O N T I N G E N T	U N L I Q U I D A T E D	D I S P U T E D	AMOUNT OF CLAIM
Account No. <b>unknown</b>  <b>TD Bank USA/Target Credit</b> <b>P.O. Box 673</b> <b>Minneapolis, MN 55440</b>		<b>W</b>	<b>claim incurred in 2011 for credit card purchases</b>				<b>466.00</b>
Account No. <b>3554</b>  <b>The Emergency Group, Inc.</b> <b>770 Kapiolani Blvd.</b> <b>Suite 705</b> <b>Honolulu, HI 96813</b>		<b>W</b>	<b>claim incurred in 08/2014 for medical services for joint debtor</b>				<b>17.42</b>
Account No. <b>2890</b>  <b>Union Plus Credit Card</b> <b>P.O. Box 30275</b> <b>Salt Lake City, UT 84130-0275</b>		<b>H</b>	<b>claim incurred in 2012 for credit card purchases</b>				<b>5,569.74</b>
Account No.							
Account No.							

Sheet no. **5** of **5** sheets attached to Schedule of  
Creditors Holding Unsecured Nonpriority ClaimsSubtotal  
(Total of this page)**6,053.16**Total  
(Report on Summary of Schedules)**90,300.24**

United States Bankruptcy Court  
District of Hawaii

In re JUANITO MALICDEM BATO, II  
ALDA JOY COLLO BATO

Debtor(s)


Case No. 14-01667

Chapter 13

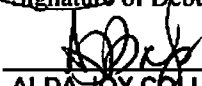
**VERIFICATION OF CREDITOR MATRIX - AMENDED**

The above-named Debtors hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 02.20.15

  
JUANITO MALICDEM BATO, II  
Signature of Debtor

Date: 2.20.15

  
ALDA JOY COLLO BATO  
Signature of Debtor

Ann McIntire, Esq.  
Mandarich Law Group, LLP  
6301 Owensmouth Ave Ste 850  
Woodland Hills, CA 91367

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Honolulu, HI 96814-1876

Calvin S. Oishi, M.D., Inc.  
P.O. Box 30570  
Honolulu, HI 96820-0570

Capital One  
c/o Marvin S.C. Dang, Esq  
P.O. Box 4109  
Honolulu, HI 96812-4109

Capital One  
P. O. Box 30281  
Salt Lake City, UT 84130-0281

Central Pacific Bank  
P.O. Box 3590  
Honolulu, HI 96811-3590

Chemi Toi  
c/o National Recovery Agency  
2491 Paxton Street  
Harrisburg, PA 17111-1036

Citifinancial, Inc.  
91-1001 Kaimalie Street  
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Ewa Beach, HI 96706

Citifinancial, Inc.  
c/o Marvin S.C. Dang, Esq.  
P.O. Box 4109  
Honolulu, HI 96812-4109

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Kessner Umebayashi Bain & Matsunaga  
220 S King St Ste 1900  
Honolulu, HI 96813

GECRB/Chevron  
Bankruptcy Department  
P.O. Box 103106  
Roswell, GA 30076-3106

GECRB/GE Capital  
c/o P.O. Box 965036  
Orlando, FL 32896-5036

GECRB/Walmart  
c/o Portfolio Recovery Assocs., LLC  
120 Corporate Boulevard  
Norfolk, VA 23502

Greigh I. Hirata, M.D., Inc.  
P.O. Box 1300  
Mail Code 61247  
Honolulu, HI 96807

Hawaii Pet Imaging Centers, LLC  
c/o Credit associates of Maui  
P.O. Box 1074  
Wailuku, HI 96793

Hawaii USA FCU  
1226 College Walk  
Honolulu, HI 96817

HSBC  
c/o CACH, LLC  
4340 S. Monaco Street, 2nd Floor  
Denver, CO 80237-3485

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Kessner Umebayashi Bain & Matsunaga  
220 S King St Ste 1900  
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Macy's  
c/o Northald Group, Inc.  
P.O. Box 390846  
Minneapolis, MN 55439

Nordstrom FSB  
P.O. Box 13589  
Scottsdale, AZ 85267-3589

OneMain Financial  
NTBS-2320  
6801 Colwell Boulevard  
Irving, TX 75039-3192

OneMain Financial  
NTBS-2320  
3801 Colwell Boulevard  
Irving, TX 75039-3198

Pacific Radiology Group, Inc.  
321 N Kuakini St  
Suite 405  
Honolulu, HI 96817

Pan Pacific Pathologists, LLC  
P.O. Box 1880  
Hilo, HI 96721-1880

Penn Foster  
14300 N Northsight Boulevard  
Suite 120  
Scottsdale, AZ 85260

Physician Fin. Recovery Svc., LLC  
1132 Bishop Street  
Suite 303  
Honolulu, HI 96813

Primary Financial Services, Inc.  
4950 Genesee Street  
Suite 140  
Buffalo, NY 14225-5570

Radiology Associates, Inc.  
P.O. Box 30990  
Honolulu, HI 96820-0990

Sorbella Guillermo, M.D., Inc.  
94-300 Farrington Highway  
Suite F8  
Waipahu, HI 96797-2648

TD Bank USA/Target Credit  
P.O. Box 673  
Minneapolis, MN 55440

The Emergency Group, Inc.  
770 Kapiolani Blvd.  
Suite 705  
Honolulu, HI 96813

Union Plus Credit Card  
P.O. Box 30275  
Salt Lake City, UT 84130-0275